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| No. W 16138 | | Due no later than Aug 31, 2017 | | Annual Report Form | | 2. Registered Agent and Address (NO PO BOX) | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | | 1. Mailing Address: Correct in this box if needed. OPSYS MANAGEMENT & CONSULTING, LLC SHANNON L WOOD 4067 E TIMBERSAW DRIVE BOISE ID 83716-5744 | | SHANNON L WOOD 4067 E TIMBERSAW DRIVE BOISE ID 83716-5744 | | 3. <u>New</u> Registered Agent Signature:* | |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager. | | | | | | | |
| Office Held | Name | Street or PO Address | City | State | Country | Postal Code | |
| MANAGER | SHANNON L WOOD | 4067 E TIMBERSAW DRIVE | BOISE | ID | | 83716-5744 | |
| 5. Organized Under the Laws of: ID W 16138 | | 6. Annual Report must be signed.* Signature: Shannon L Wood Name (type or print): Shannon L Wood | | Date: 08/31/2017 Title: Manager | | | |
| Processed 08/31/2017 | | * Electronically provided signatures are accepted as original signatures. | | | | | |